


NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) Chuah 73-19 (ALU/125735)
In re Application of <div style="text-align: center;">Chuah</div>		
Application Number <div style="text-align: center;">10/658,674</div>		Filed <div style="text-align: center;">09/09/2003</div>
For COMMUNICATIONS PROTOCOL BETWEEN A GATEWAY AND AN ACCESS POINT		
Art Unit <div style="text-align: center;">2617</div>		Examiner <div style="text-align: center;">Chuck Huynh</div>
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ <u>0</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Applicants filed a Notice of Appeal on 8/5/09. The Appeal fee at that time was \$540 and the fee was paid by credit card. Therefore, <u>no Appeal Fee is due at this time</u>. In the event any further fees are due, the Commissioner is authorized to charge any such fees to Counsel's Deposit Account 60-4802.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. _____.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p>I am the</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>39,414</u></p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____</p> </div> <div style="width: 35%; text-align: center;"> <p> Signature</p> <p>Eamon J. Wall Typed or printed name</p> <p>732-542-2280 X120 Telephone number</p> <p>9/9/10 Date</p> </div> </div> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".</p> <p><input type="checkbox"/> *Total of _____ forms are submitted.</p>		